

1-1-1977

Implementing of learning centers in a resource room for primary learning disabled children

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THE IMPLEMENTING OF LEARNING CENTERS
IN A RESOURCE ROOM
FOR
PRIMARY LEARNING DISABLED CHILDREN

by
Janet M. Jakubowski

A RESEARCH PAPER
SUBMITTED IN PARTIAL FULFILLMENT OF THE
REQUIREMENTS FOR THE DEGREE OF
MASTER OF ARTS IN EDUCATION
(EDUCATION OF LEARNING DISABLED CHILDREN)
AT THE CARDINAL STRITCH COLLEGE

Milwaukee, Wisconsin

1977

This research paper has been
approved for the Graduate Committee
of the Cardinal Stritch College by

Sister Joanne Marie Kiichan

Date Feb. 21, 1977

PREFACE

Many different classroom tracts have been implemented by school districts in the teaching of the handicapped child, running the gamut from self-contained classrooms to resource rooms to being completely mainstreamed. Each tract has its own particular advantages and/or disadvantages according to what an observer has set up as standard.

Past classroom experience has proven that there will always be a place for all the tracts in a school system, possibly working side by side, to accomodate the individual differences in students.

The following chapters present insights into the various tract systems and discuss how they work as seen through the eyes of noted researchers in the special education field.

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CHAPTER 1

INTRODUCTION

An Educational Overview

Educators are always seeking new ways to present ideas, especially to children. It becomes a daily challenge to every educator to motivate and capture the interest of the young mind and set it soaring to new heights. To achieve this goal, many different teaching approaches are now in use with varied degrees of success.

The use of traditional teaching methods seems to be failing, not because the method is poor but because today's student is more knowledgeable and more sophisticated.

Although a variety of special education classes have been made available in most school districts, these have usually been limited and have not been sufficient to meet the needs of all of the pupils. To remedy this, Learning Resource Centers for Exceptional Children have been set up with the primary objective of stimulating the development of prescriptive teaching approaches by providing supplemental services to the regular special education program. Emphasis was placed on the development of resource services in the areas of psychoeduca-

tional therapy, pupil and parent counseling, inservice training, and parent education.¹

In the learning resource center, the passive student becomes an eager, aggressive learner. The pupils are eager to come to class to learn in a responsible way. A daily excitement prevails.

The learning center concept is keyed to helping youngsters develop certain behaviors within an atmosphere of freedom. These behaviors are:

1. to evidence increased ability in decision making regarding one's own learning program
2. to be able to make increasingly more appropriate selections of materials with which to help oneself to learn
3. to exhibit tenacity
4. to be able to fail without a sense of hopelessness
5. to demonstrate the desire for ever-increasing responsibility for one's own learning progress
6. to be able to work independently
7. to demonstrate ways of applying what one has learned

¹Robert E. Valett, "The Learning Resource Center for Exceptional Children," Exceptional Children 36 (March 1970): 527.

8. to find joy in learning and to find the paths that lead to successful, self-rewarding achievement.¹

These learning resource centers are organized programs for the individualization of instruction. Pupils may work by themselves, in groups, or on a one-to-one tutoring basis with the instructor.

Description and Definition of Learning Disabilities

Although relatively new, the field of learning disabilities is growing rapidly. In the past, many professionals felt that it was not that difficult to identify a learning disabled child. The child was presumably a boy. He was described as hyperactive, overly aggressive, distractible, impulsive, unstable, easily frustrated. He appeared bright and yet was educationally retarded. Individual intelligence tests indicated an above average level. The common comment by both his teachers and parents was usually "He is lazy" or "He just doesn't try". He frequently reversed letters and words while reading, spelling or writing. On the other hand, he might have fewer problems in arithmetic but his computation was likely to be erratic, due to his poor reading skills. Sports were not his favorite pastime because of his poor motor coordination. Peer relationships were at a minimum, due to his aggressive behavior or poor attitudes. Elders felt him incorrigible.

¹Joyce Fern Glasser, The Elementary School Learning Center for Independent Study (West Nyach, New York: Parker Publishing Company, 1971): 8.

Recent findings indicate many inaccuracies with this viewpoint. Learning disabilities may also affect the girls. Motor coordination may be excellent and the child may excel at sports. There may be reading prowess but with no comprehension. Difficulty in self-expression may be present. The child may be withdrawn or shy. A combination of learning difficulties may be present simultaneously. Constant research is expanding our knowledge and know-how in diagnosing and prescribing for the learning disabled child.

The term "Learning Disability" is a professional label which has gained widespread acceptance in a number of disciplines, and the need for further definition is obvious. As a consequence, serious attempts have been made to evolve a general definition to serve multidisciplinary purposes. However, because programs must correspond to the needs of children, multi-purpose definitions do not adequately express medical, psychological, social and educational facets in a way which designates appropriate services.¹

Learning disabilities was operationally defined to describe children who were evidencing an academic achievement deficit in one or more subject area while demonstrating normal verbal intelligence, with at least one developmental year of

¹Corrine E. Kass and Helmer R. Myklebust, "Special Reports" Journal of Learning Disabilities 7 (July 1969): 38.

measured deficiency in the visual, auditory, or integrative perceptual areas on selected tests.¹

Physical impairment, intelligence, language disorders, perceptual dysfunction, emotional instability, and experiential deprivation are all factors that, combined or in association, influence learning disabilities.²

Many diverse professions are concerned, directly or indirectly, with the learning disabled child, such as: psychology, psychiatry, neurology, medicine, ophthalmology, speech pathology, physical therapy and educators. Each profession uses its own terminology in defining etiology, i.e., brain-damaged, central nervous system dysfunction, Strauss syndrome, perceptual impairment, hyperactive or hyperkinetic, minimal brain-damage, developmental lag, dyslexia, aphasia, etc.

Clements (1966) used the term "minimal brain dysfunction" in his definition that follows: "The term 'minimal' brain dysfunction syndrome refers...to children of near average, average, or above average general intelligence with learning and/or behavioral disabilities ranging from mild to severe, which are associated with deviations of functions of the central nervous system..... These deviations may manifest themselves

¹David A. Sabatino, "An Evaluation of Resource Rooms for Children with Learning Disabilities," Journal of Learning Disabilities 4 (February 1971):84-93.

²W. E. Ferinden, Jr. et al, "A Supplemental Instructional Program for Children with Learning Disabilities," Journal of Learning Disabilities 4 (April 1971):193-203.

by various combinations of impairment in perception, conceptualizations, language, memory and control of attention, impulse, or motor function.¹

Barbara Bateman, (1967) a psychologist and educator, compares the intellectual potential with the level of performance...children who have learning disorders are those who manifest an educationally significant discrepancy between their estimated intellectual potential and actual level of performance related to basic disorders in the learning processes, which may or may not be accompanied by demonstrable central nervous system dysfunction, and which are not secondary to generalized mental retardation, educational or cultural deprivation, severe emotional disturbance, or sensory loss.²

In 1964, Capobianco, a psychologist, formulated a definition that was not as restrictive as the others: "Modern educators and psychologists have attempted to skirt the problem of diagnostic difficulty by coining a new phrase for the old list of names...children with learning disorders (or disabilities). This new phrase provides for the inclusion of all youngsters with a syndrome of behaviors which interfere with the learning process and yet eliminates the inherent difficulty in establishing the existence of brain injury. Hence, the

¹U.S., Department of Health, Education, and Welfare, Minimal Brain Dysfunction in Children by Sam D. Clements (Washington, D.C.: Government Printing Office, 1966).

²Barbara Bateman, "Learning Disabilities-An Overview," Journal of School Psychology 3 (December 1965):220.

modern special class for children with learning disorders may be composed of youngsters who are brain injured, emotionally disturbed, visually impaired, auditorily handicapped, intellectually subnormal, or suffering from some motor imbalance---perhaps any one individual may be hampered by a combination of these handicaps.¹

Johnson and Myklebust imply a neurological dysfunction: ...we refer to children as having a psychoneurological learning disability, meaning that behavior has been disturbed as a result of a dysfunction of the brain and that the problem is one of altered processes, not of a generalized incapacity to learn.²

The 1967 convention of the Council for Exceptional Children needed a working definition for their own use and formulated the following: "A child with learning disabilities is one with adequate mental ability, sensory processes, and emotional stability who has a limited number of specific deficits in perceptual, integrative, or expressive processes which severely impair learning efficiency. This includes children who have central nervous system dysfunction which is expressed primarily in impaired learning efficiency".³

¹R. F. Capobianco, "Diagnostic Methods Used with Learning Disability Cases," Exceptional Children 31 (July 1964).

²Doris Johnson and Helmer Myklebust, Learning Disabilities: Educational Principles and Practices, (New York: Grune & Stratton, 1967):8.

³Ibid..

The National Advisory Committee on Handicapped Children in their annual report to Congress in 1968 formulated this concise definition: "Children with special learning disabilities exhibit a disorder in one or more of the basic psychological processes involved in understanding or using spoken or written language. These may be manifested in disorders of listening, thinking, talking, reading, writing, spelling or arithmetic. They include conditions which have been referred to as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, developmental aphasia, etc. They do not include learning problems which are due primarily to visual, hearing, or motor handicaps, to mental retardation, emotional disturbance, or to environmental disadvantage."¹

In this paper the term 'learning disabilities' will refer generally to what Kirk speaks of as "psychological developmental deficits". His inclusive definition follows: A learning disability refers to a specific retardation or disorder in one or more of the processes of speech, language, perception, behavior, reading, spelling or arithmetic.²

These disabilities may include poor auditory and/or visual perception, an inability of vocal or manual imitation; an inability of comprehending verbal directions or being

¹U.S., Department of Health, Education, and Welfare, Special Education for Handicapped Children, by the National Advisory Committee on Handicapped Children, (Washington D.C., January 1968):4.

²Samuel Kirk, Educating Exceptional Children, (Boston: Houghton-Mifflin, 1972).

able to carry out the motor act required; an inability to place events in proper sequence; an inability to memorize and recall; an inability to form concepts or associations.

There is much confusion and concern as to the causes of learning disabilities in children who appear relatively normal intellectually and physically, yet academically are working below their potential. Alfred A. Strauss began conducting research concerning the diagnosis and education of brain-injured children in 1940. "He described these children as having perceptual disorders, perseverative difficulties, thinking or conceptual disorders, and behavioral disorders. The description of the children as hyperactive, explosive, erratic, and uninhibited fit in well with the observations of children made by clinical workers...They tended to persevere, organized their perceptual world on the basis of parts rather than wholes, and frequently were confused by figure-ground relationships."¹ They presented a difficult problem.

The term brain-injured may not be appropriate for all children. "The concept of the 'brain-damaged' child has been used to designate a certain pattern of behavior disturbance irrespective of the fact of brain damage."²

¹Charles W. Telford and James M. Sawrey, The Exceptional Individual, (Englewood Cliffs, N.J., Prentice-Hall, Inc. 1967):342.

²Ibid..

To differentiate the brain-injured child from others, a medical diagnosis has to correlate with the presence of brain dysfunction, such as: injury at birth, prematurity, high fevers, complicated pregnancies, head injuries, or a deprivation of oxygen for any amount of time. For the other children who function like Strauss' brain-injured children, but for whom a medical diagnosis is difficult or impossible to establish, the term "learning disabilities" was chosen for identification.¹ Rather than emphasizing a presumed cause, it focuses on the problem the child faces. It is still a blanket term in that it does not specify the areas in which the child has learning problems nor does it specify the learning processes in which the child is deficient.²

Statement of Purpose

In reviewing existing, published programs, a wide range of discrepancies is revealed in what is really meant by the term "resource room".

To most people, a resource room or learning center is an organized program for the individualization of instruction, and as a place where friends may choose to work as learning partners; it is also a place where a youngster may be found working on the floor in a group, or singly on a sofa, or at a desk.³

¹ Charles W. Telford and James M. Sawrey, The Exceptional Individual, (Englewood Cliffs, N.J., Prentice-Hall, Inc. 1967):342.

² Janet W. Lerner, Children with Learning Disabilities, (Boston: Houghton Mifflin Co. 1971):21.

³ Joyce Fern Glasser, Learning Center for Independent Study, (West Nyack, N.Y.: Parker Publishing Co. 1971):8.

Some resource rooms are nothing more than self-contained classrooms with a new label over the door. Some are specifically designed for distributing materials and consultative advice; others provide for direct services to specific categories of children, e.g., the deaf, blind. Class size, or numbers of children served, range from five to thirty-five or more. In some programs the resource room teachers seldom interact with other members of the teaching staff, while in other programs a high priority is placed on staff interactions.¹

The purpose of this paper, therefore, was to evaluate the need (why) for a resource room, its advantages and disadvantages; what it does for the learning disabled child academically and socially; what is its administrative structure; and how this academic and social achievement is accomplished.

Limitations

Although many years of research on learning resource centers were reviewed, only the past ten years of research were included. Only the primary learning disabled child was considered, excluding all other classes of handicapped children, e.g., educable mentally retarded, trainable mentally retarded, etc.

Learning disability was operationally defined to de-

¹Roger Reger, "What is a Resource Room Program?" Journal of Learning Disabilities 6 (December 1973):15.

scribe children who were evidencing an academic achievement deficit in one or more subject areas while demonstrating normal verbal intelligence, with at least one developmental year of measured deficiency in the visual, auditory, or integrative perceptual areas on tests selected.¹

This paper basically evaluated the why, what and the how of a learning resource center for learning disabled children in view of the psychological and academic gains made in the program.

Resource Centers

One out of ten children in the United States are handicapped. A handicapped child may have a speech defect, hearing loss, vision problem, learning disability, be emotionally disturbed, crippled or multiple handicapped. Fewer than forty percent of these children are now enrolled in special education programs, the rest are among the forgotten.

Today, the courts and state legislatures are mandating the right to a free public education suitable to the needs of all children. By the hundreds of thousands, children with mental, physical, learning, emotional, and multiple handicaps are going to public schools for the first time, and the law now requires that the environment must be changed to fit them.²

¹David A. Sabatino, Ph.D., "An Evaluation of Resource Rooms for Children with Learning Disabilities." Journal of Learning Disabilities 4 (February 1971):8.

²Educational Facilities Laboratories, One Out of Ten (New York, N.Y., October 1974):2.

A variety of special classes have been made available in most school districts, but they are still insufficient to meet the needs of all handicapped students. The rapid expansion of these special class programs led to a search for alternatives to special classes for students with problems and the resource learning centers were among the alternatives. There seems to be a large degree of variation among these programs and there is not universal understanding of this kind of approach.

There appear to be at least three important dimensions along which resource programs differ:

1. Direct versus indirect service: the children may receive instruction directly from the resource teacher, or indirectly from the classroom teacher with the resource teacher serving as a consultant.
2. Ability vs. skill: skill oriented programs focus on basic school tasks such as reading and arithmetic; ability oriented programs concentrate on central processes such as perception, motor or psycholinguistic skills.
3. Resident versus itinerant: A resource teacher may serve one school on a daily basis, or more than one school on a part time basis.¹

A major advantage of the resource room approach is that the children are assigned to regular classes and thus easily stay within the school's mainstream. The special needs of the student can be met on an individualized basis or in a small group of not more than three. Consistent daily involve-

¹ Joseph R. Jenkins and William F. Mayhall, "Describing Resource Teacher Programs," Exceptional Children, (September 1973):35.

ment in a responsive resource room can reduce academic deficits or maladaptive behavior. "The utilization of resource rooms could bring continuity to program planning for children with academic deficits, thereby, bridging the gap between regular and special education."²

The underlying assumption for this type of approach is "in an enriched and carefully planned environment that supports 'the natural drive toward learning' children are able to learn mostly by themselves from each other and from books. They learn in encounters with the things and people around them, and they do so at their own irregular and individual pace. They learn most intensely when they are interested and see the pertinence of what they are doing. The role of the teacher is important, but quite untraditional. There are few, if any, whole-class lessons, no standardized tests, no meticulously detailed and rigidly enforced curriculum."¹ A feeling is generated that the regular class teacher is the learning coordinator and the resource room teacher is an assistant, who helps further the goals established primarily by the learning coordinator.²

As a disadvantage, one of the major issues of contention is the process by which students become members of the

¹

Sabatino, An Evaluation of Resource Rooms:84-93.

²Charles E. Silberman, ed., The Open Classroom Reader, (New York: Random House 1973):39.

special class because they are not learning (or refuse to) distinguish them as subnormal or different because they have failed to measure up to the standardized expectations.¹ This critical aspect of special classes such as: mentally retarded, emotionally disturbed, learning disabled, etc. has become a prime target of criticism since it necessitates classification and labeling.

Arguments, pro or con, about this or that educational structure, are probably less meaningful than the exploration of the possible alternatives with which learning handicapped children might be served.

Children with learning disabilities seemingly do not profit from repeated exposure to regular classes. Indeed, they need something extra, be it behavioral modification, prescriptive teaching, or emotional support--a teaching structure or instructional procedure somewhere between the regular curriculum and the special class. A resource room may be one possible alternative.²

¹Diane Divoky, "Educations Latest Victim: The L.D. Kid," Learning, (October 1974):20-25.

²David A. Sabatino, "An Evaluation of Resource Rooms for Children with Learning Disabilities." Journal of Learning Disabilities 4 (February 1971):84-93.

Resource Teacher

Highly skilled, accountable instructional personnel are essential to the effective operation of a resource room. If one room, it should be served by a highly trained professional, who is capable of diagnosing the child, of planning a teaching program on the basis of this diagnosis, and of implementing the teaching plan. In addition to diagnosing and teaching, the resource teacher may be a consultant, aiding the classroom teacher in interpreting teaching methods, approaches, and materials. He/she may help the classroom teacher plan the classroom instruction for the child with learning disabilities. Moreover, the resource teacher may be responsible for in-service sessions, demonstration lessons, and continuous evaluation of the progress of the children.¹

The following criteria are deemed essential:

1. The teacher must have specific preparation in working with psychologists, speech teachers, physical education teachers, nurse, and administrators, as well as parents.
2. The teacher must be able to acquire the capacity to administer a variety of group achievement and individual diagnostic tests.
3. The teacher must use a variety of curricular interventions and reinforcement procedures to achieve specific goals.
4. The teacher must be prepared to employ a variety of evaluative measures of pupil progress.²

¹Lerner, Children with Learning Disabilities, p. 258.

²James Q. Affleck, Thomas W. Lehning, Kateri D. Brow, "Expanding the Resource Concept," Exceptional Children (May 1973):446-53.

The resource learning center, with its flexible scheduling system, can easily incorporate the training program of student teachers.

Resource teachers may also be required to change their role from instructor to that of instructional manager depending on the severity of the referrals and on the teacher's ability to draft and manage tutors. The learner in a tutorial setting controls his progress through the instructional sequence by his rate of mastery.¹

Summary

Recent indications point to an increased nationwide interest in establishing resource-room programs for children classified as handicapped. Other special classes are being eliminated and resource learning centers substituted in their place so as to increase the numbers of children served. These learning centers are organized programs for individualization of instruction. Students develop desirable behaviors within an atmosphere of freedom.

The term learning disabilities was defined and described. Limitations of this paper were delineated. The learning resource center is a new idea and has few guidelines and standards. It is subject to a variety of interpretations about what it is intended to accomplish and how it should

¹Jenkins et al, Comparing Small Group and Tutorial Instruction in Resource Rooms:245-50.

operate. A description of the resource room and its staff was reviewed.

This paper will evaluate the why, what and how of a learning resource center in view of the psychological and academic gains made in the program.

CHAPTER 11

WHAT IS A RESOURCE ROOM?

The Beginning of a Resource Room

Early in the 1930's, libraries were integrated into the elementary public schools as special places for the children to further develop ideas and learning. At that time they consisted solely of books, pamphlets, and periodicals. Then the educational facilities expanded to meet the needs of the blind by adding story records, record players and earphones. It was logical that the addition of tapes and tape recorders followed.

As social structure changed so did the reactions and needs of the people within its boundary. Technological advances forced curriculum change. The evolution of the library into learning centers became evident. New media, now seen as key tools for learning and an expanding development of audio-visual equipment, brought learning centers more into educational focus. This concept slowly began to expand to include all types of materials and resources with many new functions and activities. This collection and organization of materials and resources with many new functions and activities became known as an "Instructional

Material Center" with the main idea being the improvement of instruction on an individualized basis. This concept aimed to provide students with richer educational opportunities and easy accessibility of materials and individualized instruction. Most likely it was a lab organized by subject and equipped to meet the curriculum design.¹

Recently, courts and state legislatures have passed laws giving the handicapped population the right to a free public education suitable to their needs. According to this law, public schools must accept these children and provide whatever remedial and compensatory service is necessary to educate them in the least restrictive environment. Many school districts maintain only two alternatives; placement in a special education class or enrollment in a special school.²

Learning disability among school age children has become a national health and educational problem of considerable magnitude.³ They attribute learning disabilities

¹Lloyd J. Trump, "Independent Study Center-Their Relation to the Central Library," The Bulletin of the National Association of Secondary School Principals (Washington D.C., January 1966):45-51.

²Educational Facilities Laboratories, One Out of Ten-School Planning for the Handicapped (New York, N.Y., March 1975):4-5.

³D. A. Sabatino and D. I. Hayden, "The Information Processing Behavior and Teacher Judgments Associated with School Failure," Journal of Experimental Education (December 1970):40-58.

to a lack of coordination of stimuli input of all the senses.¹ It is estimated that twenty percent of all elementary school children fail to adjust either to the social order of the classroom or the academic standards established at a specific grade level.

It is seriously doubted that school systems can provide enough space or funding to place the large number of children with learning disabilities into special classes.² Therefore, most school districts are converting class areas into resource rooms for the academic enrichment of these children. This concept of the resource room program is new, without guidelines or standards, and subject to a variety of interpretations about what it is intended to accomplish and how it should operate.

Educators are in agreement that these children are happier in a regular classroom rather than a special class, although they still need the help of a special teacher. "Mainstreaming" the educational strategy that integrates the handicapped with the nonhandicapped was considered the ideal answer. The mainstreamed student is based in a regular classroom for more than fifty per cent of the day and receives remedial instruction in the resource room.³

¹G. O. Johnson and H. R. Myklebust, Learning Disabilities: Educational Principles and Practices (Grune & Stratton, New York 1968)

²Sabatino, and Hayden, The Information Processing Behavior:43.

³Bonnie Roberts, "Making It Into the Mainstream," Teacher (December 1975):37.

Definition of a Resource Room

A resource room program is defined as a means of/for providing children having disabilities or problems with direct services for two or three hour periods and with indirect service through consultation with their classroom teachers, and through in-service training.¹

It was operationally defined to describe children who were evidencing an academic achievement deficit in one or more subject areas while demonstrating normal verbal intelligence, with at least one developmental year of measured deficiency in the visual, auditory, or integrative perceptual areas on the tests selected.²

Some resource rooms are nothing more than self-contained classes with a new label over the door. Some are specifically designed for distributing materials and consultative advice. Others provide for direct services to specific categories of children, such as the deaf, blind, mentally retarded, etc. Class size, or numbers of children served range from five to thirty-five or more. In some programs the resource-room teachers seldom interact with other members of the teaching staff, while in other programs a high priority is placed on staff interactions.³

¹Roger Reger, M.A., "What is a Resource Room Program?" Journal of Learning Disabilities 6 (December 1973):17.

²Sabatino, "An Evaluation of Resource Rooms For Children With Learning Disabilities:"28.

³Reger, "What is a Resource Room Program?" 15.

Weiderholt sees a resource room as any special educational instructional setting to which a child comes for a specific period of time on a regularly scheduled basis for remedial instruction.¹

Advantages of a Resource Program

There are many advantages in a resource room program, which are:

1. There is no need to label children placed into such a program.
2. Children remain mainstreamed.
3. Students receive dual instruction, both from the regular classroom teacher and from the specialist.
4. There is a greater leeway for flexibility in instructional techniques for trying alternatives for varying approaches.
5. The classroom teacher receives immediate feedback on the student's progress.
6. More children can be serviced.
7. There is community support by parents.²

Disadvantages of a Resource Program

No sooner is a resource program implemented than the flood of referrals exceeds the capacity of the resource teacher to attend individually to each referral. Faced with growing demands for service, the tendency is to sacrifice individualized programming while accommodating more children.

¹Reger, What Is a Resource-Room Program?:19-21.

²Ibid..

Resource teachers then seem compelled to behave as though they had returned to the classroom-grouping similar children, relying on self-instructional exercises, and teaching children in small group settings.¹

Legislators are concerned with the cost of educating handicapped children. When the handicap is visible and quantitative, the extra cost is more easily justifiable. Researchers in learning disabilities have not yet agreed upon quantitative criteria and prevalence figures.

Why a Resource Room?

In November 1975, the "Education of All Handicapped Children's Act" became Public Law 94-142. The federal government committed itself to educating all handicapped children. Public Law 94-142 states: "All handicapped children would be educated with children who are not handicapped, unless the nature or severity of the handicap is such that education in the regular classroom cannot be achieved satisfactorily.

According to the United States Office of Education, seven million school aged Americans, twelve percent in the 6-19 age group, are emotionally, physically, or mentally handicapped. The focus is not on the severely handicapped, but on the mildly handicapped such as: the educable

¹Frederick Andelman et al, "What's It All About?" Today's Education (March, April 1976):18-19.

mentally retarded, emotionally disturbed or learning disabled, etc..¹

Recently, court decisions and state laws and regulations determined that these children are entitled, at public expense, and according to their needs, the same educational rights as other children have.

One hundred million dollars was scheduled for their education in 1975, and will expand to \$3.1 billion by 1982. Federal payments are based on average per pupil expenditures, ranging from five percent in 1978, to forty percent in 1982. Seventy-five percent of the money passes through state education agencies and then is passed on to local school districts. All students from 3-21 years of age are entitled to receive these related services.²

Most school districts already have existing programs for these children and are now seeking ways of expanding them. The purpose of the programming is to assist the handicapped learner toward more successful academic achievement and personal adjustment.³

Up to now, these programs tended to separate these students from their peers. This self containment was in-

¹Andelman et al, "What's It All About?":18.

²B. R. Gearheart, Learning Disabilities--Educational Strategies (St. Louis: C. W. Mosby Company, 1973):21.

³Andelman:19.

adequate because it damaged the self-concept of the child. Recent studies have shown that the cognitive development of the students in a special self-contained classroom was not as rapid as was his normal counterpart in a regular classroom setting. He compared unfavorably both academically and socially.¹

To become eligible for state funding, it became necessary to attach a label to these children. Of late, this labeling has been severely criticized.

1. It is disturbingly easy to make inappropriate generalizations concerning an individual student because he has been given a label with undeniably negative connotations.
2. Labels ignore the interactive nature of instruction and assume that the cause of instructional problems is in the child.
3. Labels are often not accurate and can be embarrassing to a student.²

One of the major issues of contention is the process by which students become members of the special class. It is felt that removing a child from a regular class because he is not learning (or refuses to) distinguishes him as subnormal or different because he has failed to measure up to the standardized expectations.³

¹Bonnie Roberts, "Making It Into the Mainstream," Teacher, (December 1975):27.

²M. Stephan Lilly, "Special Education--A Cooperative Effort," The Education Digest 41 (November 1975):11-12.

³Diane Divoky, "Education's Latest Victim: The 'ID' Kid," Learning (October 1974):20-25.

The prevailing movement of direction towards elimination of these problems is "mainstreaming". According to Webster's dictionary, it is defined as: "the prevailing movement of direction" and it is the current method of integrating special classes.

Others have defined it as: "moving handicapped children from their segregated status in special education classes and integrating them with normal children in regular classrooms."¹ For some children it might mean integration with other students for non-academic work, such as physical education, music, or art. For others, it is an assignment to a regular classroom for part of the day, plus a resource room for intensive language training for the other part of the day. Remediation of a process disability such as auditory or visual perception difficulties are constantly in progress.

The special class is physically integrated into a regular school system and contains five to ten children who have been previously diagnosed as learning disabled. It is a total learning program which consists of modifications of or additions to school practices intended for the ordinary child, as well as special equipment not available to the regular classroom.²

¹Myron Brenton, "Mainstreaming," Today's Education (March, April 1974)

²J. L. Weiderholt, "Planning Resource Rooms for the Mildly Handicapped," Focus on Exceptional Children 5 (May 1974):1-10.

Actually it is an organized program for the individualization of instruction, and as a place, it is where friends may choose to work as learning partners: it is a place where a youngster assumes the responsibility for his learning progress; it is a place where youngsters may be found working on the floor, in a group, or singly at a desk or on a chair. The resource learning center aims to provide a school framework within which an individual student may find the guidance, climate and media to learn and find purpose and joy in learning.¹

Utilization of resource rooms could bring continuity to program planning for children with academic deficits, thereby bridging the gap between regular and special education.² The goal for these students is to receive the needed service with a minimum of interruption in relationships with the regular classroom. A resource room can serve more students in its caseload and can serve them in small, manageable groups.³

Children with learning disabilities are far from being a homogeneous group as to academic functioning. They may do well in one area and fail miserably in another. They may do well on a task one day and be unable to do the task the following day. Their unpredictability is their most striking

¹Joyce Fern Glasser, Learning Center for Independent Study (West Nyack, N. Y.: Parker Publishing Company 1971):8-23.

²Sabatino, "An Evaluation of Resource Rooms," :84-93.

³W. D. Lance, "Learning Resource Systems for Special Education," TIP 14 (April 1975):90-98.

characteristic in academic behavior.

These learning disabled children do not profit from repeated exposure to regular classes. Indeed, they need that something extra, be it behavioral modification, prescriptive teaching, or emotional support--a teaching structure or instructional procedure somewhere between the regular curriculum and the special class. The critical need is to identify children who have 'real' impairments in learning that cannot readily be overcome by minimum variations in the regular classroom instruction.¹ The resource room may be a possible alternative.

The process of designing individual programs of instruction to meet the special educational needs and the uniqueness of each child has begun. The state of Massachusetts passed a new comprehensive special education law known as Chapter 766, effective in September of 1974. It guarantees an educational program responsive to the special needs of the handicapped, with the major emphasis on mainstreaming. Most special education teachers hail mainstreaming as the greatest educational development of this century. The variety of advantages ascribed, ranges from; removing the stigma associated with special classes; to providing realistic situations in school; to preparing these handicapped students for future

¹Schrag, The Myth of the Hyperactive Child.

experiences, when they are no longer a part of the school population.

Mainstreaming these children is one of the most complex educational innovations ever undertaken and unless advance preparation is carried out, great potential harm may result. Barbara Bateman, a nationally recognized authority on learning disabilities, says bluntly, "Learning disabilities has become an incredibly successful excuse for the failure of the public schools to adequately teach those children who truly need good teaching."¹

Much has been published about different teacher's experiences in the area of mainstreaming:

"The children who have been mainstreamed into my class over the past two years have had a variety of learning disabilities and emotional behavioral difficulties. With the cooperation of support personnel, I have been able to individualize instruction and have small group work in reading and math to meet their needs. In addition, these children leave my room for certain portions of the day to have additional intensive work with the learning disabilities teacher in a resource room."

Janet S. Bellizen, 1st grade Tarky Elementary Teacher, Woburn, Massachusetts.

"The negative aspect of a resource room is that teachers who can work effectively with special needs children will probably have more of them and be over burdened as a consequence."

Nancy H. Joslin, 5th grade F. A. Merrion School, Acton, Massachusetts.

¹Arlene Silberman, "If They Say Your Child Can't Learn," Readers Digest (July 1976):149-154.

"It has had the effect of helping special needs children become more comfortably familiar, more acceptably different, and more frequently included. They pass in the corridors independently. They communicate with other children in class, at lunch, in gym, before and after school. They have a chance to interact socially with all types of children."¹
Leonard C. McGrath, Peabody School, Cambridge, Mass.

Sociological research keeps us abreast of the changes in how the child learns and what affects the child's capacity to do so. The techniques teachers employ reflect the growth of knowledge because the classroom is the place where teaching theory is tested and where its practical effects are judged. It is the child who is affected by the results.

The aim of teaching should be the progress and well being of not only the class as a whole, but also of each child within it. Too little change promotes boredom; too much may promote havoc, so sound organization is essential for the child's welfare. If the child can understand class organization, he can conduct himself within it. When his/her needs for activity and participation are met, then he/she can share the attention of the teacher with others whose needs are similar to his/her own.

An organizational structure that works well in one set of circumstances may not necessarily work well in another. It must meet the criterion. It is not enough to supply

¹Frederick Andelman, "Mainstreaming in Massachusetts Under Law 766," Today's Education 65 (March, April 1976):20-7.

books, materials and equipment and expect the student to learn through investigation. They play an important part but in addition the teacher must suggest and guide rather than merely assign.

There must be responsible leadership, adequate pupil personnel, modification in scheduling, and curriculum design, systematic evaluation, and reporting of program developments.¹

Since children served in a resource room program still attend regular classes most of the day, the stigma that may result from segregation should be diminished. Also, since resource programs reduce teacher pupil ratio for any given time slot, they should enhance the potential for highly individualized instructional programming resulting in increased student achievement.²

Referred children have in past failed to learn with group instruction in the regular classroom. Most important is the provision of one-to-one instruction. This is a costly solution. Special classes are expensive and they serve only a limited number of children. A resource room provides more help to more children than does a self-contained class and at a great reduction in cost.

¹John Ryor, "Mainstreaming," Today's Education (March, April 1976):5.

²Joseph Jenkins et al, "Comparing Small Group and Tutorial Instruction in Resource Rooms," Exceptional Children (January 1973)

In order to lower the cost even more, it would be more practical to train and manage tutors, who provide one-to-one instruction. The child works at his/her own pace and controls his/her progress through rate of mastery.¹

How to Set Up a Resource Room

Where Does One Begin?

Two national organizations i.e., The Association for Children With Learning Disabilities, and the Division for Children With Learning Disabilities, a component of the Council for Exceptional Children, have generated public interest in children with learning problems. They have initiated school programs for them, obtained funds to support special projects such as, teacher training programs and continued research in this area.

This movement has experienced a great deal of ambiguity and uncertainty as to what constitutes a learning disability and once identified, what is the best method for remedial procedures.²

The question of which children are to be included in the category of learning disabled is fundamental to many of the problems currently confronting the field. Large numbers

¹J. R. Jenkins and W. F. Mayhall, "Describing Resource Teacher Programs," Exceptional Children 40 (September 1973): 35-6.

²J. H. Meier, "Prevalence and Characteristics of Learning Disabilities Found in Second Grade Children," Journal of Learning Disabilities (April 1971):2-21.

of school children, 3-15% of the total school population, are labeled as learning disabled. About 2% of these children exhibit relatively severe learning disorders, the greater majority are merely underachievers in one or more of the basic academic subject areas.

The assumption underlying the provision of services to the learning disabled is that a team approach be utilized in the diagnosis and educational planning of the learning disabled child. These would include an administrator of special education, whose job it is to act as a facilitator and that his primary duty is to develop curricular and instructional strategies that would result in accomplishments of the objectives of the program. As a corollary to this, he assumes responsibility for the supervision of the collection of data to prepare formative and summative evaluation of each child's progress throughout the school year.¹ There would, also, be an educational psychologist, a social worker, a learning disabilities specialist, the principal, the classroom teacher and a speech therapist as needed.

A battery of tests is administered, which diagnoses disturbances in the child's perceptual/psycholinguistic functioning and helps identify candidates for the learning disabilities program. These tests might include:

¹James Q. Affleck et al, "Expanding the Resource Concepts," Exceptional Children (May 1973):447.

Wechsler Intelligence Scale for Children
 Bender Visual Motor Gestalt Test
 Illinois Test of Psycholinguistic Abilities
 Detroit Test of Learning Aptitude
 Peabody Picture Vocabulary Test
 Frostig Developmental Test of Visual Perception
 Beery-Butenica Visual Motor Integration Test
 Wepman Auditory Discrimination Test
 Goldman, Fristoe, Woodcock Auditory Discrimination
 Test

Tests in the academic areas might include:

Key Math
 Woodcock Reading Test
 Kottmeyer Spelling
 Wide Range Achievement Test

There should be a deficiency of one or more years between grade placement and academic achievement and a disability in at least two areas of sensory perception.

It is interesting to note that virtually every state education agency mandates that some 'process' disorder within the child be verified (i.e., the child must be given tests which purports to measure process abilities) before a pupil can be labeled learning disabled.¹

Once the child who has learning disabilities has been identified as having some internal disorder that significantly interferes with the efficient utilization of sensory data from his/her immediate environment, an educational plan is implemented that will enable the child to achieve at a

¹Stephen C. Larsen, PhD, "The Learning Disabilities Specialist; Role and Responsibilities," Journal of Learning Disabilities (October 1976):39.

level commensurate with his/her ability.

School systems could not provide enough space or funding to place the large number of children with learning disabilities into special classes so other instructional procedures had to be developed. The main objective was to maintain the child with learning disabilities in a regular educational program while, at the same time, provide specialized professional help to alleviate the area of disability. The resource room was the answer.

Description of Program

The resource room plan provides for the learning disabilities pupil to be enrolled in the regular classroom where he/she would receive much of his/her instruction. The resource room would be a standard classroom used as the base for the assigned resource room learning disabilities teacher and the location of all materials necessary for the individualized programs for the children to be served. The pupil could receive either individual or small group instruction.

Pupils could be grouped at their approximate age levels, or grouped with similar etiologies, such as: auditory, visual, perceptual or motor difficulties etc.

Eligibility For the Program

The assignment of children in and out of the room is the primary responsibility of the basic child study team in

consultation with the school's teaching and administrative staffs. Pupils are eligible for the learning disability resource room when they are appropriately classified according to the rules and regulations of the program and at the recommendation of the multi-disciplinary team.

A prescribed individual educational plan must be developed by the team which indicates that the resource room is the most appropriate program for the pupil.

The number of children in the resource room for instructional purposes should not exceed the maximum allowable for the category of handicap of the assigned children.

Schedule

The daily academic scheduling of children in and out of the resource room is the joint responsibility of the resource room teacher and the regular classroom teacher. The instruction time will vary with the need of the pupil.

Scheduling should provide for the special needs of the pupil without jeopardizing his/her participation within the regular class.

The pattern of scheduling children in and out of the resource room should be flexible as to the numbers and lengths of the time periods for the individual children.

The resource room schedule should allow for unassigned time for the resource room teacher to meet with the child

study multi-disciplinary team, teachers, and parents, and to observe children in their regular classrooms.

Role of the Learning Disabilities Resource Teacher

The learning disabilities teacher must be certified. He/she must be prepared to give the pupil the special assistance he needs in remediation of his learning disabilities. Also, he/she will tutor the pupil in regular subjects and counsel him. He/she will assist the regular classroom teacher with the adjustment of the classroom to meet the needs of the pupil, and to help parents in understanding their child's learning problem.

The specific instructional guide followed daily by the classroom teacher and including such particulars as materials to be used should be devised by the learning disabilities teacher consultant in consultation with the regular classroom teacher.

He/she should be included in all multi-disciplinary team deliberations when the pupil is being considered for placement, re-evaluation, or termination.

Special Services Personnel

All pupil personnel services of the district should be made available to the pupil in the resource program. The program should be part of the total special education program and supervised accordingly.

Physical Facilities

The location of the resource room should be in a school that is appropriate to the population being serviced, i.e., elementary, junior high or senior high. The room should be large enough to provide space for special equipment and for the maximum group of pupils it will serve.

Number of Pupils Served

The number of pupils who can be served by a resource room will vary according to the severity of their problems and the individualized programs. The pupils with similar educational deficits could be accommodated for short periods of time in small groups.¹

Teaching the Individual Child

The teacher is a catalyst in the classroom enabling teaching to take place. The teacher asks a question to shift emphasis to productive argument, or to clarify a point, or genuinely to request a new lead in the activity taking place.

Talking for children is as natural as growing. Teachers do not ask their children to stop growing. If

¹The Resource Room Program for Learning Disabilities-How to Plan, Implement and Evaluate (New Jersey: Eric Document Reproduction Service, ED 111 124, 1976).

talking leads to communication and to learning then to stop learning is to stop living.¹

To really know your child in the classroom is to:

1. Relate--Personalize content to the lifestyle and background of each student.
2. Help--Help the student learn at his own pace through tutoring, individualized instruction, contracting and a continuous progress curriculum.
3. And above all, care--Truly care about the lives of all individuals, and make an impact in the lives of some. Caring and communicating go beyond the confines of the content. Caring means...

Honesty. Be honest with yourself and others. Students know if you truly care or are just playing a role.

Trust. Trust others to grow in their own time and in their own way. This requires patience.

Humility. Be ready and willing to open up to others to learn more about them and yourself.

Hope. Have confidence that students will grow through your caring.

Courage. Be willing to relate to youngsters in an open manner, which may lead to the unknown.

Caring. Helping others grow. Isn't that what teaching is really about?

¹John Bremer and Anne Bremer, Open Education: A Beginning (Bantam Book, September 1972).

²David E. Dial, "Teaching the Individual Child," School and Community (April 1975).

Summary

This chapter is a review of the what, why and the how of a resource room.

Due to the passage of recent laws mandating equal opportunities for all handicapped children, resource rooms have been established as one of the methods of educating these children in the least restrictive environment.

A resource room program is defined as a means for providing children having learning disabilities with direct services for two or three hour periods daily and with indirect service through consultation with their classroom teacher.

The child receives dual instruction, individualized from the learning disabilities specialist and from his/her classroom teacher. More children can be serviced in this manner in a more economical way. The child suffers no labeling in this process.

The child, after being referred, is evaluated by a multi-disciplinary team, and if he/ she meets the deficiency criteria is placed in a resource room program. An educational plan is implemented to fit the individual needs of the child. The child is mainstreamed, spending a limited amount of time in the resource room, and the rest of the time in a regular classroom.

CHAPTER 111

IMPLEMENTING A LEARNING CENTER

IN A RESOURCE ROOM

One Teacher's Experience

It was the first week of September and the beginning of a new school year. The new teacher walked into a large, bright, bare classroom with a few pieces of furniture. It consisted of a teacher's desk and chair, two large 4x6ft. tables, six folding chairs, and three student desks. One complete side of the wall had four foot high built-in bookcases, two sides of the wall were chalkboard, and the fourth side consisted of tall windows with a wide ledge beneath them. It was an ideal room with unlimited possibilities.

In her hands, the new teacher carried a list of fifteen names of students suspected of having learning disabilities. The list had been compiled by the CESA teacher at the end of the previous semester. The district was initiating a pilot learning disabilities program for levels K-8th and it was the job of the new learning disabilities teacher to set up the new program in the most suitable way to accomodate the maximum amount of children.

The district, being small, had allotted a budget of \$300.00 a year for supplies barely enough for necessities. Supplies were ordered the previous February by each classroom teacher but none were ordered for the new program. However, the principal was most understanding and at the next faculty meeting requested the teachers to share their supplies. There was an overwhelming response to his request and the learning disabilities teacher found she received more supplies than she could possibly make use of in one semester, such as: chalk, erasers, paper, pencils, pens, clips, art supplies, etc. All the consumables she needed were donated by the other faculty members.

At this time, the school district was adopting a new basal reader, math books and social studies books. The entire outdated store room was being refurbished and all the outdated books were being discarded and about to be burned. It proved to be a gold mine of reading materials of all kinds and on all levels, kindergarten through eight grades. She found basal readers by Sheldon, Betts, Ginn, Macmillan, Allyn and Bacon, etc. She also discovered old math books, social studies books, spellers, and old library books. A few workbooks to be used in conjunction with the basal readers were donated to the resource room by other classroom teachers.

The library furnished a wealth of audio-visual materials, such as: a Systems 80 with phonic, spelling, and math records, cassette recorders with tapes, film viewers, overhead

projector, phonograph and records and a calculator. Four more student desks were added from another vacant classroom. In the storeroom, she found a piece of unused 4x8ft. plywood, which when set on its side, was cut and hinged, made a beautiful 2x6ft. divider when placed between the two tables. (one on each side of the divider) The classroom was beginning to take form, but so many more supplies for teaching were needed to accommodate the wide range of classes, kindergarten through eight grade.

The new teacher, tactfully, approached each one of the other classroom teachers, explained her plight and asked them for any teaching materials in their room that was in excess, or not used. With this method she was successful in attaining a fourth and fifth grade SRA reading kit, complete set of Readers Digest Reading books, two science kits, an assortment of records from the music department, Barnell Loft and MacMillan Specific Skill Series and much more too innumerable to list. She was finally ready to begin teaching.

Testing

Needless to say, the first month was spent in the diagnostic testing of students; staffings with the multidisciplinary team consisting of a special administrator, psychologist, social worker, principal, learning disabilities teacher, classroom teacher, parent, and a speech therapist. At first, testing materials were borrowed from either the

speech therapist or the reading teacher. Among the tests administered were the Illinois Test of Psycholinguistic Abilities, Detroit Test of Learning Aptitude, Peabody Picture Vocabulary Test, Frostig Developmental Test of Visual Perception, Beery-Butenica Visual Motor Integration Test, Wepman Auditory Discrimination Test, Goldman, Fristoe, Woodcock Auditory Discrimination Test. Tests in the academic areas may include: Key Math, Woodcock Reading, Kottmeyer Spelling. The psychologist administered the Wechsler Intelligence Scale for Children, Bender Visual Motor Gestalt Test and the Wide Range Achievement Test. Pupils were eligible for the resource room program when they were appropriately classified according to the rules and regulations of the district. A prescribed individual educational plan was developed by the team which indicated that the resource room was the most appropriate program for the student.

Scheduling

There were now fifteen students in the program but new referrals were pouring in. 88 out of the 180 school days were spent in diagnostic testing cutting into the time for remedial teaching. By the end of the school year, the program had an enrollment of between 20-22 students, too many for one teacher to handle successfully on an individualized basis. Something had to be done quickly.

The instruction time varied with the need of the pupil.

Scheduling provided for the special needs of the pupil without jeopardizing his/her participation within his/her regular class. The resource and classroom teachers jointly worked out a program and a schedule based on the recommendations of the child study team. Students were scheduled according to need, from twenty minutes for the least disabled to one-half day for the severely disabled. Scheduling hours were flexible.

Teaching Method

The new teacher began remediation of the student's learning disabilities using a clinical approach, that is: working solely on areas of weakness and through the student's strength. With this method the weak processes were strengthened or eliminated but the academic progress continued to be slow and below grade level. Unhappy with these results, the teacher changed to the remediation of the processes through the product areas. Emphasis was put on phonics, reading, math, and spelling. Close contact with all classroom teachers was maintained. The students program was set up in collaboration with the classroom teacher, an educational plan written for both the classroom and the resource room and put into effect. The resource room furnished all necessary supplies and learning materials. They could include a listening center for taped stories from the classroom basal reader, Hegge drills, the Sullivan Individualized reader, phonic books, etc. The goal--help the child function successfully and bring him/her

up academically to grade level while eliminating his/her weakness.

During this time students were eliminated as they made successful progress academically and perceptually and others were brought into the program but the numbers remained constant at 20-22 students.

Implementing Learning Centers

About the beginning of the second school year, the kindergarten teacher was disposing thirty or more large, wooden building blocks, measuring 8 inches square and 2 feet long because of their rough varnished exterior due to use. The little children were getting slivers into their fingers when handling the blocks. The learning disabilities teacher gladly accepted her offer of these blocks and had her children sandpaper the rough exteriors until they were smooth. Out of these blocks, three dividing walls were built on the one wall of the classroom, dividing the wall into learning modules. Pieces of sample carpeting were laid on the floors of each module and a student's desk placed in the center of the module. An electrical outlet was placed into each module section enabling the student to use the audio-visual equipment. This was the beginning of the learning centers. The wall looked like this:

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XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
X      X      X      X      X
X      X      X      X      X
X      X      X      X      X

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This wall also contained the chalkboard so that each module had its own chalkboard.

By now the teacher had added a controlled reader

a language master, DLM Audio-discrimination and memory tapes, the Ideal phonics tapes for both long and short vowels to her audio-visual equipment. She also had a variety of learning games to reinforce lessons. Student's lessons were highly structured with each child's lesson plans listed on a 2x4in. card, which was picked up at a box at the door on entrance to the classroom. The child's list had a choice of lessons individualized to his/her particular disability and weakness. The students spent 10-15 minutes per lesson and then go on to the next one.

Even with all the structure the teacher found herself unable to do all the things she wanted and needed to do and again she was forced to look elsewhere for the answer.

Tutoring

The resource room now contained eight learning centers and the learning disabilities teacher looked toward the tutoring of her students and she would circulate and supervise.

Among her students, there were between 5-8 severely disabled and one child who was a probable dyslexic. Three students used the Fernault system for learning sight vocabulary which was very slow and tedious and demanded a one-to-one basis. Again she turned to her fellow teachers for aid. 7 and 8th grade student tutors were drafted. Each tutor was assigned a child and given explicit instruction on what and how to teach the disabled child. A chart was maintained on each child showing his/her progress in each area being taught. The teacher circulated among the tutors supervising

advising and answering questions.

Divider bookcases were ordered, installed in the place of the blocks and staffed with specific learning materials for a particular academic area. One contained learning games ditto sheets and other math implements; another contains phonic games and paraphernalia; another contains spelling dittoes on all grade levels, and the last contains all audio-visual equipment. Each module is equipped with an electrical outlet to use for the cassette, language master or controlled reader. It may be used for listening or recording a lesson.

The tutoring has proven very successful as shown by the rapid strides made by each student under this tutelage toward attainment of his/her goal.

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